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PTO/SB/01 (10-00)

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<p align="center"><b>DECLARATION AND POWER OF ATTORNEY FOR UTILITY OR DESIGN PATENT APPLICATION (37 CFR 1.63)</b></p> <p><input type="checkbox"/> Declaration Submitted with Initial Filing      <input checked="" type="checkbox"/> Declaration Submitted after Initial Filing (Surcharge (37 CFR 1.16(e)) required)</p>	Attorney Docket Number	DEP5281
	First Named Inventor	Stanley Cross
	<i>COMPLETE IF KNOWN</i>	
	Application Number	10/589,063
	Filing Date	8/10/2006
	Group Art Unit	TBD
	Examiner Name	TBD

**As a below named inventor, I hereby declare that:**

My residence, mailing address, and citizenship are as stated below next to my name.  
I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

A DRILL GUIDE ASSEMBLY  
(Title of the Invention)

the specification of which

☐ is attached hereto

OR

☒ was filed on (MM/DD/YYYY) 02/23/2005 as United States Application Number or PCT International Application Number PCT/GB2005/000734 and was amended on (MM/DD/YYYY) ☐

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application.

I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or 365(b) of any foreign application(s) for patent or inventor's certificate, or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or any PCT international application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached?	
				YES	NO
0404347.7 PCT/GB2005/000734	GB GB	02/27/2004 02/23/2005	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input checked="" type="checkbox"/> <input checked="" type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>

☐ Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto:

### DECLARATION - Utility or Design Patent Application

I hereby claim the benefit under 35 U.S.C. 119(e) of any United States provisional application(s) listed below.

Application Number(s)	Filing Date (MM/DD/YYYY)	
		<input type="checkbox"/> Additional provisional application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.

I hereby claim the benefit under Title 35, United States Code, §120 of any United States application(s) listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States application in the manner provided by the first paragraph of Title 35, United States Code, §112, I acknowledge the duty to disclose material information as defined in Title 37, Code of Federal Regulations, §1.56(a) which occurred between the filing date of the prior application and the national or PCT international filing date of this application:

Application Serial No.	Filing Date	Status
		Patented Patented Patented

I hereby appoint:

☒ Practitioners at Customer Number **000027777** —

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AND

☐ Practitioner(s) named below:  
Name

Registration Number

as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith.

Address all telephone calls to Brian S. Tomko at telephone number (732) 524-1239.

Direct all correspondence to: Customer Number  
☒ or Bar Code Label **000027777** OR ☐ Correspondence address below

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City:

State:

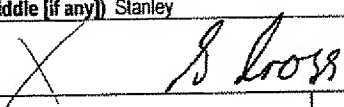
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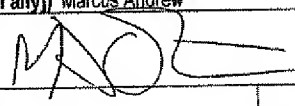
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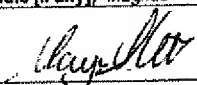
I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

NAME OF SOLE OR FIRST INVENTOR:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any]) Stanley		Family Name or Surname CROSS	
Inventor's Signature 		Date 27 <sup>th</sup> JULY 07	
Residence: City Leeds	State	Country GB	Citizenship GB
Mailing Address 7 Gainford Drive, Garforth			
City Leeds	State	ZIP LS25 1HJ	Country GB

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

NAME OF SECOND INVENTOR:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any]) Marcus Andrew		Family Name or Surname ORTON	
Inventor's Signature 		Date 17 July 2007	
Residence: City Boston Spa	State	Country GB	Citizenship GB
Mailing Address 40 Heath Drive			
City Boston Spa	State	ZIP LS23 6PB	Country GB

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NAME OF THIRD INVENTOR:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any]) Magnus		Family Name or Surname FLETT	
Inventor's Signature 		Date 27/7/07	
Residence: City Wakefield	State	Country GB	Citizenship GB
Mailing Address 27 Hatfield View			
City Wakefield	State	ZIP SF1 3SN	Country GB

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NAME OF FOURTH INVENTOR:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any]) Gary		Family Name or Surname MOORE	
Inventor's Signature <i>G. Moore</i>		Date 26 JULY 2007.	
Residence: City Wetherby	State	Country GB	Citizenship GB
Mailing Address 74 Aire Road			
City Wetherby	State	ZIP LS22 7UE	Country GB

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NAME OF FIFTH INVENTOR:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any]) Tadgh		Family Name or Surname O'SULLIVAN	
Inventor's Signature		Date	
Residence: City Waterford	State	Country IE	Citizenship IE
Mailing Address Waterford Regional Hospital, Dunmore Road			
City Waterford	State	ZIP	Country IE

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.			
NAME OF FOURTH INVENTOR:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any]) Gary		Family Name or Surname MOORE	
Inventor's Signature		Date	
Residence: City Wetherby	State	Country GB	Citizenship GB
Mailing Address 74 Aire Road			
City Wetherby	State	ZIP LS22 7UE	Country GB
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NAME OF FIFTH INVENTOR:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any]) Tadgh		Family Name or Surname O'SULLIVAN	
Inventor's Signature 		Date 15.8.07	
Residence: City Waterford	State	Country IE	Citizenship IE
Mailing Address Waterford Regional Hospital, Dunmore Road			
City Waterford	State	ZIP	Country IE